sed December 1974

CALIFORNIA LIQUID WASTE HAULER RECORD

015-7230

57012

STATE WATER RESOURCES CONTROL BOARD STATE DEPARTMENT OF HEALTH

↑			SFUND RECORDS CTR
ODUCER OF WASTE (Mus	st be filled by producer)		HAULER OF WASTE (Must be filled by hauler)
THE ALUMINUM CO. OF AMERICA SORDING			ASBURY OIL CO.
k up Address: 5151 ALCOA AVE VERNON			13419 Halldale Ave., Gardena, California 90249 Phone: (213) 321-1392
lephone Number: (2/2)	58-6/4/ P.O. or Contract N	6 6A 155 243	Pick Up:
der Placed By: J. HERON Date: 3-22-77			State Liquid Waste Hauler's Registration No. (if applicable)
	TCHING PRO Examples: metal plating, equipmen vastewater treatment, pickling bath		Job No.:No. of Loads or Trips:Unit No Vehicle: [Xvacuum truck 160 barrels, [] flatbed, [] other(speciev)
SCRIPTION OF WASTE (Must be filled by producer)		The described waste was hauled by me to the disposal facility named below and was accepted.
ueok type of wastes:			I certify (or declare) under penalty of perjury
- 1. Acid solution	6. Tetraethyl lead sludge	11. [] Contaminated soil and sand	that the foregoing is true and correct
2. Alkaline solution	7. Chemical toilet wastes	12. 🔲 Cannery waste	DISPOSER OF WASTE (Must be filled by disposer)
3. 🗋 Pesticides	8. 🗌 Tank bottom sediment	13. 🗋 Latex waste	
4. 🗍 Paint sludge	9. 🗌 Oit	14. Mud and water	Name (print or type): OPERATING INDUSTRIES, INC
5. Solvent	10. Drilling mud	15. Brine	Site Address: 2425 So. Garrield a.
Other (Specify)			Site Address: 2425 SO. Garrield Av. The hauler above delivered the Market paste to this discosal facility and it was an acceptable material under the terms of RWQCB requirement of Health regulations, and local restrictions.
xamples: Hydrochloric acid, lime, caustic soda, Concentration:			local restrictions. Quantity measured at site (if applicable): State fee (if any):
ĝaniĉs-(list), cyanide)			Handling Method(s):
			L.J recovery
			treatment (specify): CODE NO.
			disposal (specify): pond spreading landfill injection well
			Other (specify):
			If waste is held for disposal elsewhere specify final focation:
Disp			Disposal Date:
lazardous Properties of Waste: pH Xnone			I certify (or declare) under penalty of perjury that the foregoing is true and correct.
5.	г V . п	barrels	SIGNATURE OF AUTHORIZED AGENT AND TITLE
ulk Volume: 2,000	[X] gal	(142 gal.) Other [SPECIFY]	The site operator shall submit a legible copy of each completed Record to the State Department Health with monthly fee reports.
omainers. (NUMBER)	drums 🗌 cartons 🖺	bags Other	
hysical State:	solid Sliquid	Sludge other	
pecial Handling fristructions (if any):			
	Non	1E	
he waste is described to the opticable).	best of my ability and it was delive	red to a licensed liquid waste hauter (if	
ertify (or declare) under penalty of perjury at the foregoing is true and correct.			FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424 9300.

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